ther refuses to submit to the test or submits to the test and the results indicate an alcohol concentration of 0.04 or more, the person is disqualified from operating a commercial motor vehicle for the applicable period under section 321.208 in addition to any revocation of the person's driver's license or nonresident operating privilege which may be applicable under this chapter

b. If the person is operating a noncommercial motor vehicle and holding a commercial driver's license as defined in section 321.1 and either refuses to submit to the test or operates a motor vehicle while under the influence of an alcoholic beverage or other drug or controlled substance or a combination of such substances, the person is disqualified from operating a commercial motor vehicle for the applicable period under section 321.208 in addition to any revocation of the person's driver's license or nonresident operating privilege which may be applicable under this chapter.

Approved April 16, 2007

CHAPTER 70

ACQUIRED IMMUNE DEFICIENCY SYNDROME AND HUMAN IMMUNODEFICIENCY VIRUS — MISCELLANEOUS CHANGES

H.F. 610

AN ACT relating to acquired immune deficiency syndrome and the human immunodeficiency virus.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 141A.1, subsections 2, 8, and 11, Code 2007, are amended to read as follows:

- 2. "AIDS-related conditions" means the human immunodeficiency virus, or any other condition resulting from the human immunodeficiency virus infection that meets the definition of AIDS as established by the centers for disease control and prevention of the United States department of health and human services.
- 8. "Health care provider" means a person licensed or certified under chapter 148, 148C, 150, 150A, 152, or 153 to provide professional health care service to a person during the person's medical care, treatment, or confinement to practice medicine and surgery, osteopathic medicine and surgery, osteopathy, chiropractic, podiatry, nursing, dentistry, or optometry, or as a physician assistant, dental hygienist, or acupuncturist.
- 11. "HIV-related test" means a diagnostic test conducted by a laboratory approved pursuant to the federal Clinical Laboratory Improvements Act Improvement Amendments for determining the presence of HIV or antibodies to HIV.
- Sec. 2. Section 141A.1, Code 2007, is amended by adding the following new subsection: <u>NEW SUBSECTION</u>. 10A. "HIV-related condition" means any condition resulting from the human immunodeficiency virus infection.
 - Sec. 3. Section 141A.2, subsections 1, 4, and 6, Code 2007, are amended to read as follows: 1. The department is designated as the lead agency in the coordination and implementation

of the state <u>Iowa</u> comprehensive <u>AIDS-related conditions prevention and intervention <u>HIV</u> plan.</u>

- 4. The department, in cooperation with the department of public safety, and persons who represent those who attend dead bodies shall establish for provide consultation services to all care providers, including paramedics, ambulance personnel, physicians, nurses, hospital personnel, first responders, peace officers, and fire fighters, who provide care services to a person, and for to all persons who attend dead bodies, protocol and procedures for the use of universal precautions regarding standard precautions to prevent the transmission of contagious and infectious diseases.
- 6. The department, with the approval of the state board of health, may conduct epidemiological blinded and nonblinded studies to determine the incidence and prevalence of the HIV infection. Initiation of any new epidemiological studies shall be contingent upon the receipt of funding sufficient to cover all the costs associated with the studies. The informed consent, reporting, and counseling requirements of this chapter shall not apply to blinded studies.
 - Sec. 4. Section 141A.3, Code 2007, is amended to read as follows:

141A.3 DUTIES OF THE DEPARTMENT.

- 1. All federal and state moneys appropriated to the department for AIDS-related <u>HIV-related</u> activities shall be allocated in accordance with a prioritized schedule developed by rule of the department, and grants shall be awarded to the maximum extent feasible to community-based organizations <u>utilized</u> and distributed in a manner consistent with the guidelines established by the United States department of health and human services.
 - 2. The department shall do all of the following:
- a. Provide consultation <u>services</u> to agencies and organizations regarding appropriate policies for testing, education, confidentiality, and infection control.
- b. <u>Conduct Provide</u> health information <u>programs for to</u> the public <u>relating to regarding</u> HIV infection, including information about how the infection is transmitted and how transmittal can be prevented. The department shall prepare, <u>for free distribution</u>, <u>printed and distribute</u> information <u>relating to regarding</u> HIV infection and prevention.
- c. Provide educational programs consultation services concerning HIV infection in the workplace.
- d. Develop and implement Implement HIV education risk-reduction programs for specific populations at high risk for infection.
- e. Provide an informational brochure for patients who provide samples for purposes of performing an HIV test which, at a minimum, shall include a summary of the patient's rights and responsibilities under the law.
- f. In cooperation with the department of education, develop and update a medically correct AIDS recommend evidence-based, medically accurate HIV prevention curriculum curricula for use at the discretion of secondary and middle schools.
- 3. The department shall, in cooperation with the department of education and other agencies, organizations, coalitions, and local health departments, develop and implement a program of public and professional AIDS-related education.
 - Sec. 5. Section 141A.4, Code 2007, is amended to read as follows:
 - 141A.4 TESTING AND COUNSELING EDUCATION.
- 1. HIV testing and counseling education shall be offered to persons who are at risk for HIV infection including all of the following:
 - a. All persons seeking treatment testing positive for a sexually transmitted disease.
- b. All persons seeking treatment for injecting drug abuse or having a history of injecting drug abuse.
 - c. All persons who consider themselves at risk for the HIV infection.
- d. c. Male and female prostitutes sex workers and those who trade sex for drugs, money, or favors.
 - d. Sexual partners of HIV-infected persons.

- e. Persons whose sexual partners are identified in paragraphs "a" through "d".
- 2. <u>a. Pregnant women shall be provided information All pregnant women shall be tested for HIV infection as part of the routine panel of prenatal tests.</u>
- b. A pregnant woman shall be notified that HIV screening is recommended for all prenatal patients and that the pregnant woman will receive an HIV test as part of the routine panel of prenatal tests unless the pregnant woman objects to the test.
- c. If a pregnant woman objects to and declines the test, the decision shall be documented in the pregnant woman's medical record.
- <u>d. Information</u> about HIV prevention, risk reduction, and treatment opportunities to reduce the possible transmission of HIV to a fetus <u>shall be made available to all pregnant women</u>. Pregnant women who report one or more recognized risk factors for HIV shall be strongly encouraged to undergo HIV-related testing. A pregnant woman who requests testing shall be tested regardless of the absence of risk factors.
 - Sec. 6. Section 141A.5. Code 2007, is amended to read as follows:
 - 141A.5 PARTNER NOTIFICATION PROGRAM HIV.
- 1. The department shall maintain a partner notification program for persons known to have tested positive for the HIV infection.
- 2. The department shall initiate the program at alternative testing and counseling sites and at sexually transmitted disease clinics.
 - 3. 2. In administering the program, the department shall provide for the following:
- a. A person who tests positive for the HIV infection shall receive posttest counseling, during which time the person shall be encouraged to refer for counseling and HIV testing any person with whom the person has had sexual relations or has shared drug injecting equipment.
- b. The physician or other health care provider attending the person may provide to the department any relevant information provided by the person regarding any person with whom the tested person has had sexual relations or has shared drug injecting equipment. The department disease prevention staff shall then conduct partner notification in the same manner as that utilized for sexually transmitted diseases consistent with the provisions of this chapter.
- c. Devise a procedure, as a part of the partner notification program, to provide for the notification of an identifiable third party who is a sexual partner of or who shares drug injecting equipment with a person who has tested positive for HIV, by the department or a physician, when all of the following situations exist:
- (1) A physician for the infected person is of the good faith opinion that the nature of the continuing contact poses an imminent danger of HIV infection transmission to the third party.
- (2) When the physician believes in good faith that the infected person, despite strong encouragement, has not and will not warn the third party and will not participate in the voluntary partner notification program.

Notwithstanding subsection $4 \ \underline{3}$, the department or a physician may reveal the identity of a person who has tested positive for the HIV infection pursuant to this subsection only to the extent necessary to protect a third party from the direct threat of transmission. This subsection shall not be interpreted to create a duty to warn third parties of the danger of exposure to HIV through contact with a person who tests positive for the HIV infection.

The department shall adopt rules pursuant to chapter 17A to implement this paragraph "c". The rules shall provide a detailed procedure by which the department or a physician may directly notify an endangered third party.

- 4. 3. In making contact the department shall not disclose the identity of the person who provided the names of the persons to be contacted and shall protect the confidentiality of persons contacted.
- 5. 4. The department may delegate its partner notification duties under this section to local health authorities unless the local authority refuses or neglects to conduct the contact tracing partner notification program in a manner deemed to be effective by the department.
- 6. 5. In addition to the provisions for partner notification provided under this section and notwithstanding any provision to the contrary, a county medical examiner or deputy medical

examiner performing official duties pursuant to sections 331.801 through 331.805 or the state medical examiner or deputy medical examiner performing official duties pursuant to chapter 691, who determines through an investigation that a deceased person was infected with HIV, may notify directly, or request that the department notify, the immediate family of the deceased or any person known to have had a significant exposure from the deceased of the finding.

- Sec. 7. Section 141A.6, Code 2007, is amended to read as follows:
- 141A.6 AIDS-RELATED HIV-RELATED CONDITIONS SCREENING CONSENT, TEST-ING, AND REPORTING PENALTY.
- 1. Prior to obtaining a sample for the purpose of performing a voluntary undergoing an HIV-related test, a health care provider shall inform the subject of the test that the test is voluntary information shall be available to the subject of the test concerning testing and any means of obtaining additional information regarding HIV infection and risk reduction. If an individual signs a general consent form for the performance of medical tests or procedures, the signing of an additional consent form for the specific purpose of consenting to an HIV-related test is not required during the time in which the general consent form is in effect. If an individual has not signed a general consent form for the performance of medical tests and procedures or the consent form is no longer in effect, a health care provider shall obtain oral or written consent prior to performing an HIV-related test. If an individual is unable to provide consent, the individual's legal guardian may provide consent. If the individual's legal guardian cannot be located or is unavailable, a health care provider may authorize the test when the test results are necessary for diagnostic purposes to provide appropriate urgent medical care.
- <u>2.</u> Within seven days of the receipt of a test result indicating HIV infection which has been confirmed as positive according to prevailing medical technology <u>or immediately after the initial examination or treatment of an individual infected with HIV</u>, the physician or other health care provider at whose request the test was performed <u>or who performed the initial examination or treatment</u> shall make a report to the department on a form provided by the department.
- 2. 3. Within seven days of diagnosing a person as having AIDS or an AIDS-related condition, the diagnosing physician shall make a report to the department on a form provided by the department.
- 3. 4. Within seven days of the death of a person resulting from an AIDS-related condition with HIV infection, the attending physician shall make a report to the department on a form provided by the department.
- 4. <u>5.</u> Within seven days of the receipt of a test result indicating HIV infection which has been confirmed as positive according to prevailing medical technology, the director of a blood bank shall make a report to the department on a form provided by the department.
- 5. <u>6.</u> Within seven days of the receipt of a test result indicating HIV infection which has been confirmed as positive according to prevailing medical technology that is indicative of HIV, the director of a clinical laboratory shall make a report to the department on a form provided by the department.
- 6-7. The forms provided by the department shall require inclusion of all of the following information:
 - a. The name of the patient.
 - b. The address of the patient.
 - c. The patient's date of birth.
 - d. The gender of the patient.
 - e. The race and ethnicity of the patient.
 - f. The patient's marital status.
 - g. The patient's telephone number.
- h. The If an HIV-related test was performed, the name and address of the laboratory or blood bank.
- i. The <u>If an HIV-related test was performed, the</u> date the test was found to be positive and the collection date.

- j. The <u>If an HIV-related test was performed, the</u> name of the physician or health care provider who performed the test.
 - k. If the patient is female, whether the patient is pregnant.
- 7. 8. An individual who repeatedly fails to file the report required under this section is subject to a report being made to the licensing board governing the professional activities of the individual. The department shall notify the individual each time the department determines that the individual has failed to file a required report. The department shall inform the individual in the notification that the individual may provide information to the department to explain or dispute the failure to report.
- 8. 9. A public, private, or hospital clinical laboratory that repeatedly fails to make the report required under this section is subject to a civil penalty of not more than one thousand dollars per occurrence. The department shall not impose the penalty under this subsection without prior written notice and opportunity for hearing.
 - Sec. 8. Section 141A.7, subsections 1 and 2, Code 2007, are amended to read as follows:
- 1. Prior to undergoing an HIV-related test, information shall be available to the subject of the test concerning testing and any means of obtaining additional information regarding HIV infection and risk reduction. At any time that the subject of an HIV-related test is informed of confirmed positive test results, counseling concerning the emotional and physical health effects shall be initiated. Particular attention shall be given to explaining the need for the precautions necessary to avoid transmitting the virus. The subject shall be given information concerning additional counseling. If the legal guardian of the subject of the test provides consent to the test pursuant to section 141A.6, the provisions of this subsection shall apply to the legal guardian.
- 2. Notwithstanding subsection 1, the provisions of this section do not apply to any of the following:
- a. The performance by a health care provider or health facility of an HIV-related test when the health care provider or health facility procures, processes, distributes, or uses a human body part donated for a purpose specified under the uniform anatomical gift Act as provided in chapter 142C, or semen provided prior to July 1, 1988, for the purpose of artificial insemination, or donations of blood, and such test is necessary to ensure medical acceptability of such gift or semen for the purposes intended.
 - b. A person engaged in the business of insurance who is subject to section 505.16.
- c. The performance by a health care provider or health facility of an HIV-related test when the subject of the test is deceased and a documented significant exposure has occurred.
- d. The performance by a health care provider or health facility of an HIV-related test when the subject of the test is unable to provide consent and the health care provider or health care facility provides consent for the patient pursuant to section 141A.6.
 - Sec. 9. Section 141A.8, Code 2007, is amended to read as follows: 141A.8 CARE PROVIDER NOTIFICATION.
- 1. a. Notwithstanding any provision of this chapter to the contrary, if a care provider sustains a significant exposure from an individual, the individual to whom the care provider was exposed is deemed to consent to a test to determine the presence of HIV infection in that individual and is deemed to consent to notification of the care provider of the HIV test results of the individual, upon submission of a significant exposure report by the care provider to the hospital or other person specified in this section to whom the individual is delivered by the care provider as provided by rule. The significant exposure report form may be incorporated into the Iowa prehospital care report, the Iowa prehospital advanced care report, or a similar report used by an ambulance, rescue, or first response service or law enforcement agency.
- b. The hospital <u>or clinic in which the exposure occurred</u> or <u>any</u> other person specified in this section to whom the individual is delivered shall conduct the test. If the individual is delivered by the care provider to an institution administered by the Iowa department of corrections, the test shall be conducted by the staff physician of the institution. If the individual is delivered

by the care provider to a jail, the test shall be conducted by the attending physician of the jail or the county medical examiner. The sample and test results shall only be identified by a number and no reports otherwise required by this chapter shall be made which otherwise identify the individual tested.

- c. A hospital, institutions administered by the department of corrections, and jails shall have written policies and procedures for notification of a care provider under this section. The policies and procedures shall include designation of a representative of the care provider to whom notification shall be provided and who shall, in turn, notify the care provider. The identity of the designated representative of the care provider shall not be revealed to the individual tested. The designated representative shall inform the hospital, institution administered by the department of corrections, or jail of those parties who received the notification, and following receipt of this information and upon request of the individual tested, the hospital, institution administered by the department of corrections, or jail shall inform the individual of the parties to whom notification was provided.
- 2. a. If the test results are positive, the hospital or other person performing the test shall notify the subject of the test and ensure the performance of counseling and reporting requirements of this chapter in the same manner as for an individual from whom actual consent was obtained. The report to the department required pursuant to section 141A.6 shall include the name of the individual tested.
- b. If the HIV test results of the subject of the test are positive, the hospital or other person performing the test shall notify the care provider or the designated representative of the care provider who shall then notify the care provider who sustained the exposure.
- c. The notification shall be provided as soon as is reasonably possible following determination that the HIV test results of the subject of the test are positive. The notification shall not include the name of the individual tested for HIV infection unless the individual provides a specific written release. If the care provider who sustained the significant exposure determines the identity of the individual tested, the identity of the individual shall be confidential information and shall not be disclosed by the care provider to any other person unless a specific written release is obtained from the individual tested.
- 3. This section does not require or permit, unless otherwise provided, a hospital, health care provider, or other person to administer a test for the express purpose of determining the presence of HIV infection, except that testing may be performed if the individual consents and if the requirements of this section are satisfied.
- $5.\,\,\,4.\,$ A hospital, health care provider, or other person participating in good faith in making a report under the notification provisions of this section, under procedures similar to this section for notification of its own employees upon filing of a significant exposure report, or in failing to make a report under this section, is immune from any liability, civil or criminal, which might otherwise be incurred or imposed.
- 6. 5. A hospital's or health care provider's duty to notify under this section is not continuing but is limited to the diagnosis of HIV infection made in the course of admission, care, and treatment following the rendering of health care services or other services to the individual with the infection to which notification under this section applies.
- 7. 6. Notwithstanding subsection 6 5, if, following discharge from or completion of care or treatment by a hospital, an individual for whom a significant exposure report was submitted but which report did not result in notification, wishes to provide information regarding the individual's HIV infection status to the care provider who submitted the report, the hospital shall provide a procedure for notifying the care provider.
 - 8. 7. A hospital, health care provider, or other person who is authorized to perform an HIV

test under this section, who performs the HIV test in compliance with this section or who fails to perform an HIV test authorized under this section, is immune from any liability, civil or criminal, which might otherwise be incurred or imposed.

- 9. 8. A hospital, health care provider, or other person who is authorized to perform a test under this section has no duty to perform the HIV test authorized.
- 10. 9. The employer of a care provider who sustained a significant exposure under this section shall pay the costs of HIV testing for the individual who is the source of the significant exposure and of the testing and counseling of the care provider, if the significant exposure was sustained during the course of employment. However, the department shall pay the costs of HIV testing for the assist an individual who is the source of the significant exposure and of the testing and counseling of the in finding resources to pay for the cost of the HIV test, and shall assist a care provider who renders direct aid without compensation in finding resources to pay for the cost of the testing and counseling.

Sec. 10. Section 141A.9, Code 2007, is amended to read as follows: 141A.9 CONFIDENTIALITY OF INFORMATION.

- 1. Any information, including reports and records, obtained, submitted, and maintained pursuant to this chapter is strictly confidential medical information. The information shall not be released, shared with an agency or institution, or made public upon subpoena, search warrant, discovery proceedings, or by any other means except as provided in this chapter. A person shall not be compelled to disclose the identity of any person upon whom an HIV-related test is performed, or the results of the test in a manner which permits identification of the subject of the test, except to persons entitled to that information under this chapter.
- <u>2.</u> <u>Information HIV-related test results</u> shall be made available for release to the following individuals or under the following circumstances:
- a. To the subject of the test or the subject's legal guardian subject to the provisions of section 141A.7, subsection 3, when applicable.
- b. To any person who secures a written release of test results executed by the subject of the test or the subject's legal guardian.
- c. To an authorized agent or employee of a health facility or health care provider, if the health facility or health care provider ordered or participated in the testing or is otherwise authorized to obtain the test results, the agent or employee provides patient care or handles or processes samples, and the agent or employee has a medical need to know such information.
- d. To a health care provider providing care to the subject of the test when knowledge of the test results is necessary to provide care or treatment.
- To the department in accordance with reporting requirements for an HIV-related condition.
- f. To a health facility or health care provider which procures, processes, distributes, or uses a human body part from a deceased person with respect to medical information regarding that person, or semen provided prior to July 1, 1988, for the purpose of artificial insemination.
- g. Release may be made of medical or epidemiological information for statistical purposes in a manner such that no individual person can be identified.
- h. Release may be made of medical or epidemiological information to the extent necessary to enforce the provisions of this chapter and related rules concerning the treatment, control, and investigation of HIV infection by public health officials.
- i. Release may be made of medical or epidemiological information to medical personnel to the extent necessary to protect the health or life of the named party.
- j. Release may be made of test results concerning a patient pursuant to procedures established under section 141A.5, subsection 3, paragraph "c".
- k. g. To a person allowed access to a record an HIV-related test result by a court order which is issued in compliance with the following provisions:
- (1) A court has found that the person seeking the test results has demonstrated a compelling need for the test results which need cannot be accommodated by other means. In assessing

compelling need, the court shall weigh the need for disclosure against the privacy interest of the test subject and the public interest which may be disserved by disclosure due to its deterrent effect on future testing or due to its effect in leading to discrimination.

- (2) Pleadings pertaining to disclosure of test results shall substitute a pseudonym for the true name of the subject of the test. The disclosure to the parties of the subject's true name shall be communicated confidentially in documents not filed with the court.
- (3) Before granting an order, the court shall provide the person whose test results are in question with notice and a reasonable opportunity to participate in the proceedings if the person is not already a party.
- (4) Court proceedings as to disclosure of test results shall be conducted in camera unless the subject of the test agrees to a hearing in open court or unless the court determines that a public hearing is necessary to the public interest and the proper administration of justice.
- (5) Upon the issuance of an order to disclose test results, the court shall impose appropriate safeguards against unauthorized disclosure, which shall specify the persons who may gain access to the information, the purposes for which the information shall be used, and appropriate prohibitions on future disclosure.
- 1. h. To an employer, if the test is authorized to be required under any other provision of law. m. i. To Pursuant to section 915.43, to a convicted or alleged sexual assault offender; the physician or other health care provider who orders the test of a convicted or alleged offender; the victim; the parent, guardian, or custodian of the victim if the victim is a minor; the physician of the victim; the victim counselor or person requested by the victim to provide counseling regarding the HIV-related test and results; the victim's spouse; persons with whom the victim has engaged in vaginal, anal, or oral intercourse subsequent to the sexual assault; members of the victim's family within the third degree of consanguinity; and the county attorney who may use the results as evidence in the prosecution of sexual assault under chapter 915, subchapter IV, or prosecution of the offense of criminal transmission of HIV under chapter 709C. For the purposes of this paragraph, "victim" means victim as defined in section 915.40.
- n. j. To employees of state correctional institutions subject to the jurisdiction of the department of corrections, employees of secure facilities for juveniles subject to the department of human services, and employees of city and county jails, if the employees have direct supervision over inmates of those facilities or institutions in the exercise of the duties prescribed pursuant to section 80.9, subsection 2, paragraph "d".
- 3. Release may be made of medical or epidemiological information for statistical purposes in a manner such that no individual person can be identified.
- 4. Release may be made of medical or epidemiological information to the extent necessary to enforce the provisions of this chapter and related rules concerning the treatment, control, and investigation of HIV infection by public health officials.
- 5. Release may be made of medical or epidemiological information to medical personnel to the extent necessary to protect the health or life of the named party.
- 6. Release may be made of test results concerning a patient pursuant to procedures established under section 141A.5, subsection 2, paragraph "c".
- 2. 7. Medical information secured pursuant to subsection 1 may be shared between employees of the department who shall use the information collected only for the purposes of carrying out their official duties in preventing the spread of the disease or the spread of other reportable diseases as defined in section 139A.2.
 - Sec. 11. Section 915.43, subsection 4, Code 2007, is amended to read as follows:
- 4. Results of a test performed under this subchapter, except as provided in subsection 13, shall be disclosed only to the physician or other practitioner who orders the test of the convicted or alleged offender, the victim, the victim counselor or person requested by the victim to provide counseling regarding the HIV-related test and results, the physician of the victim if requested by the victim, the parent, guardian, or custodian of the victim, if the victim is a minor, and the county attorney who filed the petition for HIV-related testing under this chapter, who may use the results to file charges of criminal transmis-

sion of HIV under chapter 709C. Results of a test performed under this subchapter shall not be disclosed to any other person without the written informed consent of the convicted or alleged offender. A person to whom the results of a test have been disclosed under this subchapter is subject to the confidentiality provisions of section 141A.9, and shall not disclose the results to another person except as authorized by section 141A.9, subsection 1 2, paragraph "m" "i".

Approved April 16, 2007

CHAPTER 71

COURT RECORDS AND RECORDKEEPING — PROCEDURE, FEES, AND COSTS

H.F. 777

AN ACT relating to judicial branch practices and procedures including but not limited to adoption petitions, clerk of the district court duties, and recordkeeping affecting real estate and change of name records.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 600.3, Code 2007, is amended by adding the following new subsection: <u>NEW SUBSECTION</u>. 4. An adoption petition shall be limited to the adoption of one natural person.

Sec. 2. Section 602.8103, subsection 4, Code 2007, is amended by adding the following new paragraph:

<u>NEW PARAGRAPH</u>. k. Complaints, trial informations, and uniform citations and complaints relating to parking violations under sections 321.236, 321.239, 321.358, 321.360, and 321.361, one year after final disposition.

- Sec. 3. Section 602.8105, subsection 1, paragraph a, Code 2007, is amended to read as follows:
- a. For filing and docketing a petition, other than a modification of a dissolution decree to which a written stipulation is attached at the time of filing containing the agreement of the parties to the terms of modification, one hundred dollars. In counties having a population of ninety-eight thousand or over, an additional five dollars shall be charged and collected to be known as the journal publication fee and used for the purposes provided for in section 618.13. For multiple adoption petitions filed at the same time by the same petitioner under section 600.3, the filing fee and any court costs for any petition filed in addition to the first petition filed are waived.
 - Sec. 4. Section 617.10, Code 2007, is amended to read as follows: 617.10 REAL ESTATE ACTION INDEXED.
- 1. When a petition affecting real estate is filed, the clerk of the district court where the petition is filed shall forthwith index same the petition in an index book to be provided therefor, under the tract number which describes the property, entering in each instance the cause case number as a guide to the record of court proceedings which affect such the real estate. If the petition be is amended to include other parties or other lands, same the amended petition shall